

RiverTrek **Application
Permission & Release Form**

CRC Center _____

Name _____ Age _____ Gender _____ Date of Birth _____

Address _____ Zip _____ Home Telephone _____

Mother's Name _____ Father's Name _____

Home Address _____ Home Address _____

Home Phone _____ Work Phone _____ Home Phone _____ Work Phone _____

Work Address _____ Work Address _____

Center Membership # _____ Shirt Size (adult sizes) _____

Emergency Contact (Other than parents. Parents will be called first)

Name _____ Name _____

Address _____ Address _____

Day Phone _____ Evening Phone _____ Day Phone _____ Evening Phone _____

Authorized Escorts:

Center staff have my permission to release my child to the custody of the following persons:

Authorization is required with a phone call or written note stating time of departure after password has been verified.

Name _____ Name _____

Day Phone _____ Evening Phone _____ Day Phone _____ Evening Phone _____

Relationship _____ Relationship _____

Unauthorized Escorts:The following person(s) may **not** remove my child from the Center without prior written permission:

Name _____ Relationship _____

List any special limitations, allergies, fears, physical limitations, required assistive devices, and/or any required accommodation.

Yes _____ No _____ My child needs an accommodation, because of disability, to participate in or enjoy the program.

List any disease that your child has had and/or any history of hospitalization.

_____Additional Comments:

Conditions of Registration

Registration or entry into the RiverTrek program constitutes agreement to the following conditions:

1. I certify that the City of Cincinnati Public Recreation Commission has provided both myself and my child sufficient information that we understand the **RiverTrek** program.
2. Due to the size of the **RiverTrek** program discipline problems may occur. The staff will do their best to handle these problems on a daily basis. Please note: If a child becomes a constant discipline problem, he/she may be suspended from specific activities or dismissed entirely from the program at which time parent/guardian will be required to meet the group and pick up his/her child.
3. I give the City of Cincinnati Public Recreation Commission's employees, agents, and volunteers my permission to take my child away from the community center for all **RiverTrek** programs.
4. My child has permission to participate in all activities associated with the **RiverTrek** program (including all pre trip trainings and meetings). My child is developmentally, physically, mentally, and emotionally ready and possesses the skills necessary to participate in these activities. My child is in good physical condition and has not had a serious illness or surgery since their last health examination.
5. I give the City of Cincinnati Public Recreation Commission's employees my permission to involve my child in open swim and aquatic activities that may be associated with **RiverTrek** program.

My child is a: _____ non-swimmer _____ beginner swimmer _____ capable swimmer

6. I authorize the City of Cincinnati Public Recreation Commission to utilize photographs or videotapes of my child to be used exclusively for the promotion of the Recreation Commission's programs.
7. I understand that the City of Cincinnati Public Recreation Commission will not be responsible for any lost, stolen or damaged personal property.
8. I recognize that there are certain risks of physical injury as a result of my child's participation in this program. I agree to assume the full risk of any injuries, damages or loss which I/or my child may sustain as a result of participating in any and all activities connected with or associated with such program.

I agree to waive and relinquish all claims I may have, as a result of my child's participation in the program, against the City of Cincinnati and the Public Recreation Commission and their officers, agents, employees and volunteers.

I do hereby fully release and discharge the City of Cincinnati and the Public Recreation Commission, their officers, agents, employees and volunteers from any and all claims of injuries, damage or loss which my child may have or which may accrue to me on account of my child's participation in the program.

I further agree to indemnify, defend and hold harmless the City of Cincinnati and the Public Recreation Commission their officers, agents, employees and volunteers from any and all claims resulting from injuries, damages and losses sustained by my child or arising out of, connected with, or in any way associated with the activities of the program.

I hereby execute this waiver and release on behalf of the named minor, who is below the age of eighteen (18), and represent and warrant that I am a parent or guardian authorized to execute this wavier and release on behalf of such minor.

Participant's Signature _____ Date _____

Signature of
Parent/Guardian _____ Date _____